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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)))

Attorney Docket Number	
First Named Inventor	LAURENT ALHADEF COMPLETE IF KNOWN
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A PROCESS FOR THE TRANSMISSION OF DATA REPRESENTING THE POSITION IN SPACE OF A VIDEO CAMERA AND A SYSTEM FOR THE IMPLEMENTATION OF THE PROCESS

(Title of the Invention)

the specification of which

is attached hereto

OR

1

was filed on (MM/DD/YYYY)

04/24/2003

as United States Application Number or PCT International

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the filing date of this application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s) Country Foreign Filing Date (MM/DD/YYYY) Priority Not Claimed Certified Copy Attached? YES NO					
03105068	FR	04/24/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: The address associated with Customer Number: _____ OR Correspondence address below

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Address **4 RUE MAYET**

City **PARIS** State _____ ZIP **75006**

Country **FRANCE** Telephone **0033 14 2736616** Email _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) **LAURENT** Family Name or Surname **ALHADEF**

Inventor's Signature  Date **10.10.2005**

Residence: City **PARIS** State _____ Country **FRANCE** Citizenship **FRENCH**

Mailing Address **4 RUE MAYET**

City **PARIS** State _____ Zip **75006** Country **FRANCE**

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) _____ Family Name or Surname _____

Inventor's Signature _____ Date _____

Residence: City _____ State _____ Country _____ Citizenship _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.